

STATE OF ARIZONA **MARICOPA COUNTY** POLITICAL COMMITTEE **CAMPAIGN FINANCE REPORT**

8-31-16
via mail (cortified)
PC-2016-01

FOR OFFICE USE ONLY

	Full Name of Committee 5320 N. 1655t Stc. 111 Address Threnix AZ 85016 (602-213-070)	Via Mal (Uttifiel)
121	City Zip Code Phone	PC-2016-01
2.	Sponsoring Organization (if applicable)	
	Name of Candidate and Office Sought (if applicable)	Primary Election: August 30, 2016 General Election: November 8, 2016
	Email Address Fax #	
4.	Reporting Period (Please Check Appropriate Box)	Due Between
а	JANUARY 31ST REPORT - For Period of November 25, 2014 through December 31, 2015	January 1, 2016 and February 1, 2016
b	JUNE 30TH REPORT - For Period of January 1, 2016 through May 31, 2016	June 1, 2016 and June 30, 2016
С	PRE-PRIMARY ELECTION REPORT - For Period of June 1, 2016 through August 18, 2016	August 19, 2016 and August 26. 2016
d	POST-PRIMARY ELECTION REPORT - For Period of August 19, 2016 through September 19, 2016	September 20, 2016 and September 29, 2016
е	PRE-GENERAL ELECTION REPORT - For Period of September 20, 2016 through October 27, 2016	October 28, 2016 and November 4, 2016
f	POST-GENERAL ELECTION REPORT - For Period of October 28, 2016 through November 28, 2016	November 29, 2016 and December 8, 2016

5.	Summary	Column A Total This Reporting Period	Column B Election Period Total to Date
5a	Total Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)		
5b	Cash on Hand at the Beginning of this Reporting Period (ending balance from the previous reporting period)	Ø	
5c	Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	11,000	11,000
5d	Subtotal (add lines b and c for column A and add lines a and c for column B)	Ø	Ø
6a	Total Debts and Obligations from Previous Campaign Committee at Beginning of this Election Period (or at time Statement of Organization was filed for the new committee) [Do not add or subtract this line from the other lines]		Ø
6b	Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	Ø	Ø
7.	Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d)	11,000	11,000

DETAILED SUMMARY PAGE OF

- D	А	~	E	~
_	4	17	_	_

RECEIPTS AND DISBURSEMENTS		PAGE 2
1. Committee Name (1+12ens for a Better Surpri	SC 2.10#	2011-01
3. Report covering period of 6 16 - 8 18 16	- LPM	2016 01
RECEIPTS	Column A This Period	Column B Campaign to Date
4. Contributions other than loans and in-kind:		
(a) Individuals - more than \$50 (Total from Schedule A)	2,500	2,500
(b) Individuals - aggregate \$50 or less (Total from Schedule A-1)		
(c) Political Committees (Total from Schedule B)	8,500	8,500
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]	7	
(e) Refund of contributions (Total from Schedule F-2)		
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]		
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)		
(b) All other loans (Total from Schedule C-1)		
(c) Total Loans [add 5(a) and 5(b)]		
6. In-kind contributions (Total from Schedule E)		
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)		
B. Total Receipts [add 4(f), 5(c), 6, and 7]	11,000	11 000
DISBURSEMENTS		
	2	- C
Expenditures for operating expenses (Total from Schedule D)	-6	8
Independent Expenditures (Total from Schedule D-1)		
Value of In-kind expenditures (Total from Schedule E)		
Loans made by reporting committee (Total from Schedule D-2)		
 (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4) 		
(b) Repayment of all other loans (Total from Schedule D-5)		
(c) Total Loan Repayments [add 13(a) and 13(b)]		
Transfers to other political committees (Total from Schedule D-6)		
5. Any other disbursement (Total from Schedule D-7)		
6. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]		
7. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)		
Total disbursements [subtract line 17 from line 16]		
Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)	0	S
I certify, under penalty of perjury, that I have examined the contents of this campaign finance report and to and complete.	the best of my knowleds	ge and belief it is true
rpe or Print Name of Treasurer	15/16	
gnature of Treasurer or Candidate or Designating Individual	Date	

CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

	1. Committee Name Citizens for a Better Serprise PAC 2016-0			
	3. Report covering period fromthru			
4.	CONTRIBUTIONS NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
а	Name Core Construction Street Address 3036 E. Greenway Rd City Phoening AZ 85032 Occupation Employer	7/26/14	2,500.00	
b	Name Street Address City State Zip Occupation Employer			
2	Name Street Address City State Zip Occupation Employer			
	Street Address City State Zip Occupation Employer			
	Street Address City State Zip Occupation Employer			
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [Transfer total to Detailed Summary Page, Line 4(a), Column A]		2,500	

*If contributions of \$50 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1.

Schedule A Page ____ of ___

CONTRIBUTIONS FROM POLITICAL COMMITTEES

	CONTRI	BUTIONS FROM POLITICAL COMMITTER	ES	SCHEDULE B
1.	Committee Name	2. ID#AC 2016-01		
3.	Report covering period from	10/1/16	_thru	16
		CONTRIBUTIONS	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS
4.	IDENTITY	OF CONTRIBUTOR AND DATE RECEIVED	THIS PERIOD	CAMPAIGN TO DATE
а	DATE RECEIVED 16	NAME, ADDRESS, CITY, STATE AND ZIP. Daisy Mountain Fire fighters PAC GI G. CPlumbus Ave Phx 85012	2,500.60	
	DATE RECEIVED	NAME, ADDRESS, CITY, STATE AND ZIP PAX FF LOCAL 493 FIRE PAC COM 61 E. COLUMBUS AVE PAX 8502	1,000,00	
	DATE RECEIVED	Surprise PRO Firefighter PAC 61 E. Columbus Are Phr. 8502	5,000.00	
	DATE RECEIVED	NAME, ADDRESS, CITY, STATE AND ZIP		
е	DATE RECEIVED	NAME, ADDRESS, CITY, STATE AND ZIP		
f	DATE RECEIVED	NAME, ADDRESS, CITY, STATE AND ZIP		
g	DATE RECEIVED	NAME, ADDRESS, CITY, STATE AND ZIP		
h	ID# DATE RECEIVED	NAME, ADDRESS, CITY, STATE AND ZIP		
i	ID# DATE RECEIVED	NAME, ADDRESS, CITY, STATE AND ZIP		
5.	ENTER TOTAL ONLY IF LAST total to Detailed Summary Page	PAGE OF SCHEDULE B [if last page of Schedule B, transfer e, Line 4(c), Column A]	8,500	